

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD Disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | |
| Computer Readable Form (CRF)?:: | |
| Number of copies of CRF:: | |
| Title:: | G-CSF-CONTAINING SUBSTANCE FOR FIBROBLAST RECRUITMENT AND G- CSF-CONTAINING THERAPEUTIC AGENT FOR WOUND HEALING |
| Attorney Docket Number:: | FUKUDA 15 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 21 |
| Small Entity?:: | No |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included:: | No |
| Petition Type:: | |
| Licensed US Govt. Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |
| Applicant Information | |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Japan |

| | |
|---|--|
| Status:: | Full Capacity |
| Given Name:: | Keiichi |
| Middle Name:: | |
| Family Name:: | FUKUDA |
| Name Suffix:: | |
| City of Residence:: | Shinjuk-ku |
| State or Province of Residence:: | Tokyo |
| Country of Residence:: | Japan |
| Street of Mailing Address:: | c/o Keiko University of 35, Shinanomachi |
| City of Mailing Address:: | Shinjuku-ku |
| State or Province of Mailing Address:: | Tokyo |
| Country of Mailing Address:: | Japan |
| Postal or Zip Code of Mailing Address:: | 160-8582 |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Japan |
| Status:: | Full Capacity |
| Given Name:: | Jun |
| Middle Name:: | |
| Family Name:: | FUJITA |
| Name Suffix:: | |
| City of Residence:: | Shinjuku-ku |
| State or Province of Residence:: | Tokyo |
| Country of Residence:: | Japan |
| Street of Mailing Address:: | c/o Keiko University of 35, Shinanomachi |
| City of Mailing Address:: | Shinjuku-ku |
| State or Province of Mailing Address:: | Tokyo |
| Country of Mailing Address:: | Japan |
| Postal or Zip Code of Mailing Address:: | 160-8582 |
| Correspondence Information | |
| Correspondence Customer Number:: | 001444 |
| Representative Information | |
| Representative Customer Number:: | 001444 |
| Domestic Priority Information | |

| | | | |
|------------------|-------------------|-----------------|---------------|
| Application:: | Continuity Type:: | Parent | Parent Filing |
| | | Application:: | Date:: |
| This Application | National Stage of | PCT/IL04/016290 | 10-27-04 |

Foreign Priority Information

| | | | |
|-----------|----------------------|---------------|--------------------|
| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
| Japan | 366480-2003 | 10-27-03 | Yes |
| Japan | 36613-2004 | 02-13-04 | Yes |

1) Assignment Information

| | |
|---|---------------------|
| Assignee Name:: | Keiko University |
| Street of Mailing Address:: | 15-45, Mita 2-chome |
| City of Mailing Address:: | Minato-ku |
| State or Province of Mailing Address:: | Tokyo |
| Country of Mailing Address:: | Japan |
| Postal or Zip Code of Mailing Address:: | 108-8345 |

2) Assignment Information

| | |
|---|---------------------------------|
| Assignee Name:: | Chugai Seiyaku Kabushiki Kaisha |
| Street of Mailing Address:: | 5-1, Ukima 5-chome |
| City of Mailing Address:: | Kita-ku |
| State or Province of Mailing Address:: | Tokyo |
| Country of Mailing Address:: | Japan |
| Postal or Zip Code of Mailing Address:: | 115-8543 |